

DEPARTMENT OF WORKFORCE DEVELOPMENT
DIVISION OF ECONOMIC SUPPORT
ADMINISTRATOR'S MEMO SERIES

ACTION 00-01

ISSUE DATE: 05/18/2000
DISPOSAL DATE: 03/2002

RE: CUSTOMER
SATISFACTION SURVEY

To: W-2 Agency Directors

From: Jennifer L. Noyes /s/
Administrator

CORRECTED MEMO: Please note, Issue Date has been changed to 5/18/2000 and the "Disposal Date has been clarified.

As required by the Wisconsin Works (W-2) Request for Proposals (RFPs), the Customer Satisfaction Survey and the Customer Satisfaction Tally sheet to be used by your W-2 agency to measure the level of customer satisfaction with the services provided by your W-2 agency are attached.

The Customer Satisfaction Survey tools, as identified in the 2000-2001 W-2 RFP, are the product of a collaborative effort between the Department of Workforce Development (DWD) and the W-2 Contract and Implementation Committee (CIC).

In using the attached tools it is expected that the following be done:

- W-2 agencies may expand the Customer Satisfaction Survey tool to meet their unique needs, however;
- If an agency chooses to expand the Customer Satisfaction Survey tool to meet its needs, it must not make changes to the core document. The information being requested and the order and numbering of the core questions #1 - #11 must remain unchanged.
- W-2 agencies are to insert the name of their agency in the introductory area of the Customer Satisfaction Survey tool before the forms are distributed for customer use.
- Surveys are to be distributed and completed surveys collected every six (6) months, by June 30th and December 31st for each contract year. Survey results are due within sixty (60) days after each six (6) month survey process.
- For the 2000-2001 W-2 Contract period, the Customer Satisfaction Survey Tally sheet must be submitted to your DWD Contract Manager on or before August 31st to report the results

for the period of January 1 through June 30. The second report is due on or before February 28th to report the results for the period of July 1st through December 31st.

W-2 agencies have discretion in making the following decisions:

- How to distribute and collect the Customer Satisfaction Survey tool (mailing, during workshops, making a drop box available, etc.). Agencies can conduct phone surveys also;
- Which customers will receive the survey (W-2, FSET, Child Care, MA and/or Food Stamp only participants). Agencies can consider using different colored paper to help identify the services received by the participant;
- What determines a valid survey sample; and
- When the W-2 agency will distribute the survey as long as it is completed and submitted within the guidelines set above.

In addition, W-2 agencies must use the Customer Satisfaction Tally sheet to report the results of their surveys to their DWD Contract Manager. The following instructions are to be used for completing the tally sheet:

- Agencies must indicate the total number of surveys distributed for each reporting period;
- Agencies must indicate the total number of responses for each question in the blank space after “total received”;
- Each answer on the survey has a number value indicated above the response (1 – strongly agree; 2 – agree; 3 – disagree; etc.) Agencies are required to total the scores or number values for each response, and then determine the average score for each question by dividing the total score of the question by the number of responses received. Agencies should then enter the average score in the blank after “Average”.

The Customer Satisfaction Survey tool and the Customer Satisfaction Tally sheet are also available in Spanish and Hmong. If your agency is interested in the Spanish and/or Hmong version of these surveys, please contact your DWD Contract Manager. For additional questions relating to the surveys, contact your Contract Manager.

REGIONAL OFFICE CONTACT: Area Administrators

CENTRAL OFFICE CONTACT: Kevin Huggins
(608) 267-8931

Customer Satisfaction Survey

Dear Customer:

You recently received services through our W-2 program. The W-2 program can include:

- W-2 Cash Assistance;
- Case management services;
- Employment and Training for Food Stamps;
- Child care; and
- Food Stamps and Medical Assistance for families.

The Department of Workforce Development, the State of Wisconsin, and [insert agency name] are committed to providing the best possible services to all W-2 participants. To do this, we rely on your feedback.

Please take a few minutes and fill out the questionnaire below. Return the completed survey to the receptionist (if you complete the survey in-person) or mail back to us in the enclosed postage-paid envelope.

Please circle one answer for each statement below. Please remember each of these questions is about W-2 services.

- 1) W-2 Agency staff clearly explained what programs and services are available.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

- 2) W-2 Agency staff treats me with respect.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

- 3) W-2 Agency staff are helpful.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

- 4) W-2 Agency staff are knowledgeable.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

- 5) W-2 Agency staff clearly explain what is expected of me.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

6) My W-2 activities are of help to me.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

7) W-2 staff return my phone calls promptly.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

8) I am able to visit the W-2 Agency office during the hours it is open.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

MY OVERALL EXPERIENCE

9) I am comfortable coming to this agency for W-2 services.

1	2	3	4	N/A
Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable

Please explain: _____

10) If I could make one suggestion to improve the services I receive relating to W-2, it would be to? _____

11) Do you have any additional comments?

Thank you for providing feedback.

Customer Satisfaction Survey Tally

Agency	Contact Person	
Telephone Number ()	Report Period	Total Number of Surveys Distributed

1) W-2 Agency staff clearly explained what programs and services are available.

Total Received _____ Average _____

2) W-2 Agency staff treats me with respect.

Total Received _____ Average _____

3) W-2 Agency staff are helpful.

Total Received _____ Average _____

4) W-2 Agency staff are knowledgeable.

Total Received _____ Average _____

5) W-2 Agency staff clearly explain what is expected of me.

Total Received _____ Average _____

6) My W-2 activities are of help to me.

Total Received _____ Average _____

7) W-2 staff return my phone calls promptly.

Total Received _____ Average _____

8) I am able to visit the W-2 Agency office during the hours it is open.

Total Received _____ Average _____

MY OVERALL EXPERIENCE

9) I am comfortable coming to this agency for W-2 services.

Total Received _____

Average _____

Comments: _____

10) If I could make one suggestion to improve the services I receive relating to W-2, it would be to? _____

11) Do you have any additional comments? _____

